

(Print or Type)



Date 19

Permit #

Owner's _____

Name _____

Type of Occupancy: _____

Replacement ☐Plans Submitted Yes ☐ No ☐[illegible]

Certificate

Corp., _____

Partnership

☐ Firm/Company _____

Name of Licensed Plumber or Gasfitter _____

I have informed the owner or his agent that I do not have liability insurance including completed operations coverage.

I have a current liability insurance policy to include completed operations coverage. ☐

TYPE LICENSE:

**Signature of Licensed
Plumber or Gasfitter**

☐ Plumber
☐ Gasfitter
☐ Master
☐ Journeyman

License Number

FORM 1243 HOBBS & WARREN, INC. 1989

FINAL INSPECTION

SKETCHES

BELOW FOR OFFICE USE ONLY

PROGRESS INSPECTION

FEE _____

NO. _____

APPLICATION FOR PERMIT TO DO GASFITTING

NAME & TYPE OF BUILDING

LOCATION OF BUILDING

PLUMBER OR GASFITTER

LIC. NO.

PERMIT GRANTED

DATE _____ 19 _____

GAS INSPECTOR